

# CLAIMS ONLY

Application Number

10025866

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1					/	
2						
3						/
4						/
5						/
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Total Indep					2	
Total Depend					5	
Total Claims					7	

	Indep	Depend	Indep	Depend	Indep	Dep
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Total Indep						
Total Depend						
Total Claims						